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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	Idress)	
(Cir	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:E	merald Coast Name of Limi	Roofing Services ited Liability Company	LLC
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Louis Pala	Name of Person	
	Emerald	Coast Roofing S Firm/Company	ervices Like = -
	Enerald Coast Roofing Services LLC Name of Limited Liability Company and Articles of Amendment and fee(s) are submitted for filling. In all correspondence concerning this matter to the following: Lavis Palanex Name of Person Enerald Coast Roofing Services LTC Firm/Company 3549 Weeping U. How In Address Navarre Fl. 32566 City/Nate and Zip Code Short-14988 CACL.Com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: Area Code Daytime Telephone Number a check for the following amount: Filling Fee Certificate of Status Certified Copy (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS:		
	Navarre '	FL 32566	
			: · U1
For further information co	oncerning this matter, please ca	all:	
	Janek Person	at (631) 681 - 97. Area Code Daytime	5 Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Fiting Fee	□ \$30.00 Filing Fec & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
		STREET/COURIE Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City	, Florida	Zip Co	nde	
	r.nier r iorida	Sirect aduress			
New Registered Office Address:	Page 121-21-	street address			
Name of New Registered Agent:			<u> </u>	·	
registered agent and/or the new registered office ad		ai records, <u>citer</u>	ис лаг	iic or	tire nev
B. If amending the registered agent and/or reg	ristanad office address on o	ur records enter	; the nor		the nev
			ス ⁽¹⁾ て:セー	ر <u>ب</u> ران	
(Mailing address MAY BE A POST OFFICE BOX)			~** <u>~ · ·</u> 건 • !	=	<u>(</u>
Enter new mailing address, if applicable:			. -	_ ਹ	
				_	
			<u>- </u>	<u>-</u>	
(Principal office address MUST BE A STREET ADL	ORESS)			31 G	- 3-4
Enter new principal offices address, if applicable:				.s	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the design	gnation "LLC" or the ab	breviation	"L.L.C.	+1
Emerald Coast Exp	ert Services LLC				
A. If amending name, enter the new name of the li	mited liability company here	:			
This amendment is submitted to amend the following:					
Florida document number L18000269594	·				
The Articles of Organization for this Limited Liability	Company were filed on _\\\	1412010	and	assigne	ed:
	11 (1010218	_	_	
(Name of the Limited Liab (A Flori	lity Company as it now appears o da Limited Liability Company)	n our records.)		_	
	sting Services	LLC_	=	_	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

.

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			☐ Change
			Add
			□ Remove
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Effective date, if other than the date of filing:	(optional)	
Effective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date of filing Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	or more than 90 days after filing.) Pursuan	t to 605.020 be listed a
e record specifies a delayed effective date, but not an effecti The 90th day after the record is filed.	ive time, at 12:01 a.m. on the	earlier (
Dated		
10 %	tative of a member	

Page 3 of 3

Filing Fee: \$25.00